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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/680,625
	Filing Date	October 23, 2003
	First Named Inventor	Michel Therin
	Title	PROSTHESIS FOR REINFORCEMENT
	Art Unit	3773
	Examiner Name	Tyson, Melanie Ruano
	Attorney Docket Number	1600-25 (BR040489)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Peter DeLuca		
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I am the:


☐ Applicant/inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/86) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature		Date	May 6, 2010
Name	Michel Therin	Telephone	
Title and Company	Vice President, Sofradim Production		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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